



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C121458

1. DATE OF REPORT 1/28/2013	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	
3. COMMITTEE MAILING ADDRESS 1400 FORUM BLVD STE C1-443 CITY / STATE / ZIP COLUMBIA MO 65203	4. COMMITTEE TELEPHONE NUMBER (573) 449-7974
5. TREASURER'S NAME JOHN OTT	
6. TREASURER'S MAILING ADDRESS 212 BINGHAM RD CITY / STATE / ZIP COLUMBIA MO 65203	7. TREASURER'S TELEPHONE NUMBER HOME: (573) 489-5353 WORK: (573) 489-5353
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER VICKI HOBBS	
9. DEPUTY TREASURER'S MAILING ADDRESS 4001 S COATS LN COLUMBIA MO 65203 CITY / STATE / ZIP	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: (573) 445-4940 WORK: (573) 445-4940
11. DATE OF ELECTION 2/5/2013	12. TYPE OF ELECTION (CHECK ONE) <input type="radio"/> PRIMARY <input type="radio"/> GENERAL <input checked="" type="radio"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM 12/23/2012 THROUGH 1/24/2013	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY SUSAN G BURNS 117 W BURNAM RD COLUMBIA MO 65203 (573) 449-7974 COUNCIL PERSON CITY OF COLUMBIA <input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input checked="" type="checkbox"/> NON-PARTISAN	15. TYPE OF REPORT <input type="checkbox"/> 15 DAYS AFTER CAUCUS NOMINATION <input type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Apr 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input checked="" type="checkbox"/> 8 DAYS BEFORE <input type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input type="checkbox"/> OTHER <input type="checkbox"/> AMENDING PREVIOUS REPORT DATED _____, 20____
16. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Jan 28 2013 4:39PM _____ TREASURER'S SIGNATURE	17. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Jan 28 2013 4:39PM _____ CANDIDATE'S SIGNATURE



Missouri Ethics Commission

REPORT SUMMARY

Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
SUSAN "TOOTIE" BURNS FOR COUNCIL	1/28/2013	

Receipts		A. This Period	B. This Calendar Yr or Election Cycle	Statement of Beginning and Ending Financial Condition	
1. Total Receipts For This Election Previously Reported			\$ 11,365.00		
2. All Monetary Contributions Received This Period		\$ 8,885.00			
3. All Loans Received This Period		+ 0.00			
4. Miscellaneous Receipts This Period		+ 0.00			
5. Subtotal Monetary Receipts This Period (Sum 2A + 3A + 4A)		\$ 8,885.00			
6. In-kind Contributions Received This Period		+ 0.00			
7. Total All Receipts This Period (Sum 5A + 6A)		\$ 8,885.00			
8. Total All Receipts This Election (Sum 1B + 7A)			\$ 20,250.00		
Expenditures		A. This Period	B. This Calendar Yr or Election Cycle		
9. Total Expenditures for this election previously reported			\$ 1,604.33		
10. Expenditures made by cash or check this period		\$ 1,893.74			
11. In-Kind Expenditures made this period		+ 0.00			
12. Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3)		+ 2,000.82			
13. Total All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)		\$ 3,894.56			
14. Total Expenditures This Election (Sum 9B + 13A)			\$ 5,498.89		
Contributions Made		A. This Period	B. This Calendar Yr or Election Cycle		
15. Total Contributions Made For This Election Previously Reported			\$ 0.00		
16. All Contributions Made This Period (25A or 25B of CD3)	A	0.00	↔ Cash/Check		
	B	0.00	↔ Credit Card		
17. All In-Kind Contributions Made This Period		+ 0.00			
18. Total Contributions Made This Period (Sum 16A + 17A)		\$ 0.00			
19. Total All Contributions Made This Election (Sum 15B + 18A)			\$ 0.00		
Other Disbursements		A. This Period	B. This Calendar Yr or Election Cycle		
20. Funds Used For Paying Loans This Period Including Credit Card Payments		+ 0.00			
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)		+ 0.00			
22. Any Miscellaneous Disbursement Not Reported Elsewhere		+ 0.00			
23. Total Other Disbursements This Period (Sum 20A + 21A + 22A)		\$ 0.00			
				24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 10,260.67
				25. Monetary Receipts this Period (From Item 5 - this page)	+ 8,885.00
				26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23) a) Disbursements By Check \$ 1,893.74 b) Disbursements By Cash \$ 0.00	- 1,893.74
				27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 17,251.93
				Indebtedness	
				28. Outstanding Indebtedness at the beginning of this period	\$ 500.00
				29. Loans Received This Period	+ 0.00
				30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 2,000.82
				B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00
				31. Payments Made on Loans This Period	- 0.00
				32. Debt Forgiven on Loans This Period	- 0.00
				33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00
				34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 2,500.82



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL		2. REPORT DATE 1/28/2013	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
NAME:			
ADDRESS:			\$
CITY / STATE:			
EMPLOYER:			<input type="checkbox"/> MONETARY
<input type="checkbox"/> COMMITTEE:		\$	<input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$ 0.00	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$ 8,795.00	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 8,795.00	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ 8,795.00	
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$ 0.00	
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)		AMOUNT RECEIVED	
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$ 0.00	
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$ 0.00	
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ 90.00	
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$ 0.00	
C. LOANS RECEIVED			
15. NAME AND ADDRESS OF LENDER		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$ 0.00	
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$ 0.00	
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$ 0.00	
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$ 0.00	
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$ 8,885.00	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ 8,885.00	



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Mike & Joni See CITY / STATE: 3100 Woodbine Dr Columbia MO 65203 EMPLOYER: Self-Employed -- Physician <input type="checkbox"/> COMMITTEE:	12/26/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Rod & Andree Gelatt CITY / STATE: 1020 LaGrange Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/26/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mardy & Lisa Eimers CITY / STATE: 2605 Pine Tree Ct Columbia MO 65203 EMPLOYER: Univ of MO -- Administrator <input type="checkbox"/> COMMITTEE:	12/28/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joe & Carol Headley CITY / STATE: 5009 Cullen Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/28/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Joane O'Connor CITY / STATE: 2401 Tahoe Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/2/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sabrina McDonnell CITY / STATE: 3100 Greenbriar Dr Columbia MO 65203 EMPLOYER: Landmark Bank -- President <input type="checkbox"/> COMMITTEE:	1/2/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom Douglas CITY / STATE: 104 W Brandon Rd Columbia MO 65203 EMPLOYER: Self-Employed -- Farmer <input type="checkbox"/> COMMITTEE:	1/3/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles & Sally Abromovich CITY / STATE: 1205 Tartan Place Columbia MO 65203 EMPLOYER: Physician <input type="checkbox"/> COMMITTEE:	1/3/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Charles & Jean Gibbens CITY / STATE: 3300 Westcreek Cir Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/4/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Matt & Suzanne Beckett CITY / STATE: 2409 Marietta Falls N Columbia MO 65203 EMPLOYER: Beckett Taylor Insurance -- Insurance Agent <input type="checkbox"/> COMMITTEE:	1/5/2013 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patricia Butera CITY / STATE: 1605 Dunhill Way Columbia MO 65203 EMPLOYER: Muscular Dystrophy Assn -- Director <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 50.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Herbert & Susan Tillema CITY / STATE: 306 Westridge Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Fran Beach CITY / STATE: 108 Park Hill Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margie Sable CITY / STATE: 228 E Parkway Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael & Sarah Seat CITY / STATE: 1206 Sunset Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Ann Havey CITY / STATE: 112 Bingham Rd Columbia MO 65203 EMPLOYER: Columbia Orthopedic Group -- Physician <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Mary Lottes CITY / STATE: 10201 Burnett Sch Rd Ashland MO 65010 EMPLOYER: Self-Employed -- Advocate <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 40.00	\$ 40.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mahree Skala CITY / STATE: 5201 Gasconade Dr Columbia MO 65202 EMPLOYER: Self-Employed -- Public Health Consultant <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alyce Turner CITY / STATE: 1204 Fieldcrest Columbia MO 65203 EMPLOYER: State of MO -- Public Health <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Diana Moxon & Tom OConnor CITY / STATE: 806 Leawood Terr Columbia MO 65203 EMPLOYER: Columbia Art League -- Exec Director <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Christopher Kelly CITY / STATE: 2706 Bristol Dr Columbia MO 65201 EMPLOYER: State of MO -- Representative <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barbara Hoppe & Mike Sleadd CITY / STATE: 607 Bluff Dr Columbia MO 65201 EMPLOYER: Columbia College -- Professor <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Betty Wilson CITY / STATE: 1719 University Ave Columbia MO 65201 EMPLOYER: Self-Employed -- Attorney <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Thomas Quirk & Catherine Parke CITY / STATE: 413 Thilly Ave Columbia MO 65203 EMPLOYER: Moberly Area Com College -- Teacher <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Judy & William Weitkemper CITY / STATE: 3717 Bray Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Janice Gaston CITY / STATE: 920 Edgewood Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sylvia Mohammad CITY / STATE: 4009 Baurichter Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David & Jean Goldstein CITY / STATE: 206 E Ridgeley Rd Columbia MO 65203 EMPLOYER: Self-Employed -- Attorney <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andrew Twaddle CITY / STATE: 919 Edgewood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joe Moseley CITY / STATE: 3209 Wood Dale Ln Columbia MO 65203 EMPLOYER: Shelter Insurance -- Vice-Pres <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Terry Ganey CITY / STATE: 1515 Inverness Ct Columbia MO 65203 EMPLOYER: Self-Employed -- Freelance writer <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark & Eleanor Farnen CITY / STATE: 103 E Brandon Rd Columbia MO 65203 EMPLOYER: Self-Employed -- Marketing <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Brian Struchtemeyer CITY/STATE: 7 E Burnam Rd Columbia MO 65203 EMPLOYER: Self-employed -- Inventor <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 60.00	\$ 60.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tim & Linda Harlan CITY/STATE: 511 S Glenwood Ave Columbia MO 65203 EMPLOYER: Harlan Harlan Still -- Attorney <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Russ & Mary Still CITY/STATE: PO Box 933 Columbia MO 65205 EMPLOYER: Harlan Harlan Still -- Attorney <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donald Asbee CITY/STATE: 7281 E Zumwalt Rd Hartsburg MO 65039 EMPLOYER: Self-Employed -- Metal worker <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Linda Keown CITY/STATE: 106 W Burnam Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Asst Prof <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ann Peters CITY/STATE: 3808 Berrywood Dr Columbia MO 65201 EMPLOYER: Self-Employed -- Scientific Instruments <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ann & Fred Koenig CITY/STATE: 2 East Ridgeley Columbia MO 65203 EMPLOYER: State of MO -- Forester <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Diane Booth & Jeanne Sebaugh CITY/STATE: 3609 Holly Hills Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
---	-------------------

INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Liz Schmidt CITY/STATE: 1700 Forum Blvd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Shelley Sigholtz CITY/STATE: 7 E Brandon Rd Columbia MO 65203 EMPLOYER: TSF Inc -- Vice-Pres <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: The Copeland Law Firm CITY/STATE: 900 East Broadway EMPLOYER: Columbia MO 65201 <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carole Simon CITY/STATE: 68 N Cedar Lake Dr W Columbia MO 65203 EMPLOYER: Dept of Veterans Affairs -- Pharmacist <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 35.00	\$ 35.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Betty Beasley CITY/STATE: 1005 Willow Creek Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Melinda & Troy Norton CITY/STATE: 300 Bingham Ct Columbia MO 65203 EMPLOYER: Williams-Keepers -- CPA <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Roy Dudark CITY/STATE: 3709 Falmouth Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Al & Joan Hahn CITY/STATE: 3711 Woodridge Ct Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

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NAME: ADDRESS: Robert & Sandra Hodge CITY / STATE: 5004 Dustin Ct Columbia MO 65203 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Harry & Catherine Colyer CITY / STATE: 17 Bingham Rd Columbia MO 65203 EMPLOYER: Veterans United -- Attorney <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jason & Lana Zerrer CITY / STATE: 5505 Saddle Ridge Dr Columbia MO 65203 EMPLOYER: Truman Veterans Hospital -- Physician <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mike & Ene Chippendale CITY / STATE: 911 LaGrange Rd Columbia MO 65203 EMPLOYER: Focus on Learning -- Owner <input type="checkbox"/> COMMITTEE:	1/8/2013 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Evelyn Tanner CITY / STATE: 111 W Brandon Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	1/9/2013 \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Scott & Julie Swain CITY / STATE: 21 Bingham Rd Columbia MO 65203 EMPLOYER: The Swain Group <input type="checkbox"/> COMMITTEE:	1/10/2013 \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Peter Bartok CITY / STATE: 911 Park Ave Columbia MO 65201 EMPLOYER: Self-employed -- Real Estate <input type="checkbox"/> COMMITTEE:	1/10/2013 \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barb & Jeff Glenn CITY / STATE: 201 W Brandon Rd Columbia MO 65203 EMPLOYER: MO Cotton Exchange -- Business Owner <input type="checkbox"/> COMMITTEE:	1/10/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
---	-------------------

INSTRUCTIONS

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NAME: ADDRESS: Kenneth Green CITY / STATE: 114 Meadow Ln Columbia MO 65203 EMPLOYER: Monarch Jewelry -- Jeweler <input type="checkbox"/> COMMITTEE:	1/10/2013 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Walter & Susan Melton CITY / STATE: 25 Bingham Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/10/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wade Welshons & Susan Nagel CITY / STATE: 910 Wayne Rd Columbia MO 65203 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	1/10/2013 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Mehr CITY / STATE: 714 Ingleside Dr Columbia MO 65201 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Thomas R Smith CITY / STATE: 3100 W Old Field Rd Columbia MO 65203 EMPLOYER: Flatbranch Brewing Inc -- President <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill & Judith Harper CITY / STATE: 4011 Curt Dr Columbia MO 65203 EMPLOYER: Self-employed -- Broker/realtor <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: LeRoy & Betty Miller CITY / STATE: 32 Bingham Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marvin Rogers CITY / STATE: 2808 Butterfield Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/11/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Eng & Woods CITY/STATE: 903 E Ash EMPLOYER: Columbia MO 65201 <input type="checkbox"/> COMMITTEE:	1/11/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greg & Jennifer Golden CITY/STATE: 3208 Honeysuckle Dr EMPLOYER: Columbia MO 65203 Smith Moore -- Financial Advisor <input type="checkbox"/> COMMITTEE:	1/11/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Reza Farid & Stephanie Womack CITY/STATE: 2981 Picket Post EMPLOYER: Columbia MO 65203 Women's Health Assoc -- Physician <input type="checkbox"/> COMMITTEE:	1/11/2013 \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carol Roller CITY/STATE: 923 LaGrange Rd EMPLOYER: Columbia MO 65203 Homemaker <input type="checkbox"/> COMMITTEE:	1/12/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Pat & Karen Smith CITY/STATE: 1305 Westview Terr EMPLOYER: Columbia MO 65203 Columbia Orthopedic Group -- Physician <input type="checkbox"/> COMMITTEE:	1/12/2013 \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Janet Berry CITY/STATE: 908 Edgewood Ave EMPLOYER: Columbia MO 65203 Retired <input type="checkbox"/> COMMITTEE:	1/15/2013 \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Deanna Harper CITY/STATE: 1004 LaGrange Ct EMPLOYER: Columbia MO 65203 Univ MO Hospitals -- Service Coord <input type="checkbox"/> COMMITTEE:	1/15/2013 \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Pat Cowden CITY/STATE: 1316 Westview Ter EMPLOYER: Columbia MO 65203 Univ of MO -- Opthamologist <input type="checkbox"/> COMMITTEE:	1/15/2013 \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Carol Denninghoff CITY/STATE: 1800 Chapel Ridge Rd Columbia MO 65203 EMPLOYER: House of Brokers Realty -- Realtor <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tracey Attwood CITY/STATE: 3411 Woodrail Terr Columbia MO 65203 EMPLOYER: Not employed <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cedar Fork Construction Co CITY/STATE: 3015 S Providence Rd Columbia MO 65203 EMPLOYER: Columbia MO 65203 <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Green Meadows Executive Suites Inc CITY/STATE: 3015 S Providence Rd Columbia MO 65203 EMPLOYER: Columbia MO 65203 <input type="checkbox"/> COMMITTEE:	1/15/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tracy & Eric Barnes CITY/STATE: 4100 White Pine Ct Columbia MO 65203 EMPLOYER: Self-Employed -- Physician <input type="checkbox"/> COMMITTEE:	1/16/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: James & Susan Burns CITY/STATE: 349 Carrera Dr Mill Valley CA 94941 EMPLOYER: CA Office of Comptroller <input type="checkbox"/> COMMITTEE:	1/18/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Deana Harper CITY/STATE: 1004 LaGrange Ct Columbia MO 65203 EMPLOYER: Univ of MO Hospital -- Service Coord <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stephen Jorgensen CITY/STATE: 3709 Bray Ct Columbia MO 65203 EMPLOYER: Univ of MO -- Dean <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Thomas Detert CITY / STATE: 1009 LaGrange Ct Columbia MO 65203 EMPLOYER: Putnam Interiors -- Co-owner <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Win Colwill CITY / STATE: 1417 N Countryshire Dr Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/23/2013 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul Stuve CITY / STATE: PO Box 1427 Columbia MO 65203 EMPLOYER: MO HealthNet -- Quality Mgr <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dan & Amy Burks CITY / STATE: 3400 Cross Timber Ct Columbia MO 65203 EMPLOYER: Self-employed -- car dealership <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 125.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim & Melissa Alabach CITY / STATE: 1221 Tartan Pl Columbia MO 65203 EMPLOYER: Kroenke Group <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Monica Barbee CITY / STATE: 2931 W Ridley Wood St Columbia MO 65203 EMPLOYER: Pure Barre -- Business Owner <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andrew & Cynthia Beverley CITY / STATE: 210 E Ridgeley Rd Columbia MO 65203 EMPLOYER: Landmark Bank -- President <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 275.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Daniel and Amy Burks CITY / STATE: 3400 Cross Timber Ct Columbia MO 65203 EMPLOYER: Self-employed -- Car dealership <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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NAME: ADDRESS: William Burnham CITY / STATE: 1103 W Stewart Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dana & James Collier CITY / STATE: 1021 LaGrange Ct Columbia MO 65203 EMPLOYER: Financial Consultant <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sharon Cornelison CITY / STATE: 2704 Vistaview Terr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carol Denninghof CITY / STATE: 1800 Chapel Ridge Rd Columbia MO 65203 EMPLOYER: House of Brokers Realty -- Realtor <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 75.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Charles & Kathryn Digges Sr CITY / STATE: 7 Bingham Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Craig & Sandra Edlund CITY / STATE: 2503 Lenox Pl Columbia MO 65203 EMPLOYER: Alliance Water Resources -- Vice-Pres <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tracy Eichhorn CITY / STATE: 701 E Cedar Tree Ln Hartsburg MO 65039 EMPLOYER: Miller's Professional Imaging -- Artist <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark & Eleanor Farnen CITY / STATE: 103 E Brandon Columbia MO 65203 EMPLOYER: Strategists LLC -- Vice-Pres <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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NAME: ADDRESS: Sara Fox CITY / STATE: 2201 Danforth Ct Columbia MO 65201 EMPLOYER: Century 21 -- Realtor <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Benjamin Gakinya CITY / STATE: 101 W Thurman Columbia MO 65202 EMPLOYER: Parkade Center -- Retail Dev Mgr <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Matthew & Courtney Gaunt CITY / STATE: 505 Redbud Ln Columbia MO 65203 EMPLOYER: Conservation Federation of MO -- Dir of Dev <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bonita Grice CITY / STATE: 1310 Bradshaw Ave Columbia MO 65203 EMPLOYER: Univ of MO -- Admin Asst <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carolyn Hawks CITY / STATE: 3212 Westcreek Cir Columbia MO 65203 EMPLOYER: Self-employed -- Writer <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andy & Sarah Hill CITY / STATE: 3005 Greenbriar Columbia MO 65203 EMPLOYER: Univ of MO -- Asst coach <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: J Nolan Hollingsworth CITY / STATE: 4804 Samantha Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lisa Kayser CITY / STATE: 106 E Ridgeley Rd Columbia MO 65203 EMPLOYER: Homemaker <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Seth Kulik CITY / STATE: 4306 Derby Ridge Dr Columbia MO 65202 EMPLOYER: Food service <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robin Labrunerie CITY / STATE: 611 S Greenwood Ave Columbia MO 65203 EMPLOYER: Catholic Charities -- Family Dev Spec <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Oscar Chavez-Lopez and Marcella Lopez-Silva CITY / STATE: 207 Rockingham Dr Columbia MO 65203 EMPLOYER: Univ of MO -- Mathematician <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kathryn & L W Lucas CITY / STATE: 4801 Deer Noll Rd Columbia MO 65201 EMPLOYER: Self-employed -- Psychiatrist <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Susan Maglich CITY / STATE: 1709 S Fairview Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: E Patricia Martin CITY / STATE: 4804 Samantha Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Cheavens Design LLC CITY / STATE: 1004 Wayne Rd Columbia MO 65203 EMPLOYER: <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Barbara & Michael Mayer CITY / STATE: 104 E Ridgeley Rd Columbia MO 65203 EMPLOYER: Mayer Flanagan Scott -- Psychologist <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
---	-------------------

INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: McAdams' LTD CITY/STATE: 32 S Providence Rd EMPLOYER: Columbia MO 65203 <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sabra T Meyer CITY/STATE: 1904 Woodhollow Dr EMPLOYER: Columbia MO 65203 Self-employed -- Artist <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom OConnor & Diana Moxon CITY/STATE: 806 Leawood Terr EMPLOYER: Columbia MO 65203 Columbia Art League -- Exec Dir <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cindy & Marvin Mustard CITY/STATE: 600 S Greenwood EMPLOYER: Columbia MO 65203 Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Joane OConnor CITY/STATE: 2401 Tahoe Ct EMPLOYER: Columbia MO 65203 Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 100.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: John & Vicki Ott CITY/STATE: 212 Bingham Rd EMPLOYER: Columbia MO 65203 Alley A Realty -- Realtor <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 175.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sally Papreck CITY/STATE: 100 E Ridgeley Rd EMPLOYER: Columbia MO 65203 Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bernie Grice & Carol Patterson CITY/STATE: 3650 S Forest Acres EMPLOYER: Columbia MO 65203 Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
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INSTRUCTIONS

PURPOSE: The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
NAME: ADDRESS: Stacy Peters CITY / STATE: 1001 Marcassin Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Anastasia Pottinger CITY / STATE: 4214 Wales Columbia MO 65203 EMPLOYER: Self-employed -- Photographer <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robbie & Ali Price CITY / STATE: 111 E Brandon Rd Columbia MO 65203 EMPLOYER: Stephens College -- Instructor <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 400.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Quinlan Hospitality Group LLC CITY / STATE: 115 E Hubbell Columbia MO 65201 EMPLOYER: <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ellen Rippetto CITY / STATE: 23 N 9th St Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ellen and Thomas Rippetto CITY / STATE: 23 N 9th St Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 150.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ellen and Thomas Rippetto CITY / STATE: 23 N 9th St Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 175.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Susan Salzer CITY / STATE: 4207 Current Rd Columbia MO 65203 EMPLOYER: Self-employed -- Writer <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
---	-------------------

INSTRUCTIONS

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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Michael & Sarah Seat CITY/STATE: 1206 Sunset Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 75.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Shurtleff Froeschner Harris LLC CITY/STATE: 25 N Ninth St Columbia MO 65201 EMPLOYER: <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Grant & Mary Stauffer CITY/STATE: 6521 S Scott Blvd Columbia MO 65203 EMPLOYER: Stauffer Construction -- Business Owner <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Gary & Marilyn Upton CITY/STATE: 3304 Westcreek Cr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 125.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dave Baugher & Jaqueline Verdun CITY/STATE: 211 Bingham Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 325.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dave Baugher & Jaqueline Verdun CITY/STATE: 211 Bingham Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 350.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dave Baugher & Jaqueline Verdun CITY/STATE: 211 Bingham Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 400.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Skip & Kathy Walther CITY/STATE: 2209 Yuma Dr Columbia MO 65203 EMPLOYER: Attorney <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL	DATE 1/28/2013
---	-------------------

INSTRUCTIONS

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Robin Weatherford CITY / STATE: 818 N Valley View Dr Columbia MO 65201 EMPLOYER: Tellers Gallery & Bar -- Co-owner <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Katy Burnham Wilkins CITY / STATE: 701 West Blvd S Columbia MO 65203 EMPLOYER: Social worker <input type="checkbox"/> COMMITTEE:	1/24/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

TOTAL: ITEMIZED CONTRIBUTIONS

--

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 Instructions on Reverse Side

Office Use Only

1. Name of Committee SUSAN "TOOTIE" BURNS FOR COUNCIL		2. Report Date 1/28/2013	
A. Expenditures of \$100 or Less by Category (List Payments to Campaign Workers in Section B Below)			4. Amount Paid or Incurred This Period
3. Category of Expenditure View Supplemental Form(s)			
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 112.95
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 112.95
B. Itemized Expenditures All Over \$100 And All Payments To Campaign Workers		9. Date	10. Purpose - (If Payment was to a Campaign Worker, Show Aggregate Paid)
8. Name and Address of Recipient			11. Amount This Period
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
Name:			\$
Address:			<input type="checkbox"/> Paid
City / State:			<input type="checkbox"/> Incurred
12. Subtotal: This Page (Sum Column 11)			\$ 3,781.61
13. Subtotal: Any Attached Pages			+ 0.00
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 3,781.61
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 3,894.56
16. Amount of Line 15 Above which was Paid Out This Period			\$ 1,893.74
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 2,000.82
18. If Committee Made Any In-Kind Expenditures This Period, List Amount			\$ 0.00
19. Funds Used For Paying Loans/Credit Cards This Period (Attach Form CD1B - amount goes to Line 5 / Part II)			\$ 0.00
C. Contributions Made (Regardless of Amount)		21. Date	22. Amount
20. Name and Address of Candidate or Committee			
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
23. Subtotal: This Page (Sum Column 22)			\$ 0.00
24. Subtotal: Any Attached Pages			\$ 0.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 0.00
		B. By Credit Card	\$ 0.00
26. If Committee Made Any Loans This Period, List Amount			\$
27. Total: All Monetary Contributions and Loans Made This Period (Sum 25 + 26)			\$ 0.00
28. Total: In-Kind Contributions Made This Period, List Amount			\$ 0.00



3

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL		DATE 1/28/2013
EXPENDITURES OF \$100 OR LESS BY CATEGORY (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B ON FORM CD3 OR USE FORM CD3 SUP B)		AMOUNT PAID OR INCURRED THIS PERIOD
CATEGORY OF EXPENDITURE		
Office Supplies	\$	4.82
Postal box rent	\$	33.00
Copies	\$	75.13
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
TOTAL: ITEMIZED EXPENDITURES THIS PAGE		
(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)	\$	--



MISSOURI ETHICS COMMISSION
ITEMIZED EXPENDITURES OVER \$100 SUPPLEMENTAL FORM

OFFICE USE ONLY

NAME OF COMMITTEE SUSAN "TOOTIE" BURNS FOR COUNCIL		REPORT DATE 1/28/2013	
ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS			
NAME AND ADDRESS OF RECIPIENT	DATE	PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	AMOUNT THIS PERIOD
NAME: FastSigns ADDRESS: 2609 E Broadway CITY/STATE: Ste 200 Columbia MO 65201	12/31/2012	Yard signs \$ 0.00	\$ 1,432.05 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Hotcards ADDRESS: 1600 East 23rd St CITY/STATE: Cleveland OH 44122	1/3/2013	Printing \$ 0.00	\$ 505.32 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Midwest Mailing ADDRESS: PO Box 723 CITY/STATE: Columbia MO 65205	1/9/2013	Mailing service \$ 0.00	\$ 348.74 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: Progressive Political Partners ADDRESS: 4001 S Coats Ln CITY/STATE: Columbia MO 65203	1/24/2013	Strategic Planning & Mgmt \$	\$ 500.00 <input type="checkbox"/> PAID <input checked="" type="checkbox"/> INCURRED
NAME: Columbia Daily Tribune ADDRESS: 101 N Fourth St CITY/STATE: Columbia MO 65201	1/22/2013	Newspaper Ad \$	\$ 995.50 <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: ADDRESS: CITY/STATE:		\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED
TOTAL: ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS (CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)			\$ --